
Application Form
Study of the U.S. Institute
美國研究研習會獎學金申請表格

Name of SUSI Institute:

Personal Information

A. Full Name, as it appears on your passport. Surname should be in quotation marks.

B. Date of Birth (Month, Date, Year)

C. City of Birth

D. Country of Birth

E. Country of Residence

F. Country(ies) of Citizenship

G. Home Address, Phone and E-mail

H. Gender

I. a. Emergency Contact and Relationship

b. Emergency Contact Phone

c. Emergency Contact E-mail

J. Medical, Physical, Dietary or other Personal Considerations

Professional Information

K. Current Position and Title

L. Current Institutional Affiliation and Complete Address and Telephone Number

M. Work Experience, including Previous Positions and Titles, and date of employment

N. Education, Academic and Professional Training, including degrees earned, the dates and fields of specialization

O. Active Professional Memberships

P. Short List of Relevant Publications (no more than five-ten citations)

Q. Previous experience in the United States: Please list all trips you have made to the United States and include approximate dates and the reason for travel.

R. Family Residing in the United States: Please list any immediate family members who are currently residing in the United States, including city and state (Example: John Doe – Chicago, IL).

S. Evidence of Fluency in Written or Oral English (e.g. personal interview, test score, etc.)

T. Professional Responsibilities: Please discuss your professional responsibilities in greater detail, including research interests, administrative responsibilities (ex. curriculum design), and/or other pertinent information.

(1) Short description:

(2) Current courses taught -- should include the course title, level of student (Ph.D., M.A., undergraduate, high school), number of hours per semester, number of students, and the estimated percent of U.S. studies content.)

Course Title	Level of Students	Classroom Hours Per Semester	# Students	U.S. Studies Content (%)

(3) Current student advising -- should include the number of students advised who are studying U.S.

Number of Students Advised Studying U.S. Related Topics	Level of Students	Hours of Advising Per Student

U. Potential Outcomes:

Please select any likely potential professional outcomes of this program.

- | | |
|--|---|
| <input type="checkbox"/> Update Existing Course | <input type="checkbox"/> Create New Course |
| <input type="checkbox"/> Create New Degree Program | <input type="checkbox"/> University Curriculum Redesign |
| <input type="checkbox"/> National Curriculum Redesign | <input type="checkbox"/> New Research Project |
| <input type="checkbox"/> New Publication | <input type="checkbox"/> Professional Promotion |
| <input type="checkbox"/> Government or Ministry Policy | <input type="checkbox"/> New Professional Organization |
| <input type="checkbox"/> New Institutional Linkages | <input type="checkbox"/> Raise Institutional Profile |

Please submit a statement (no more than 2 pages) on:

1. Please discuss how your participation in this Institute would enhance your personal and professional goals, the current state of U.S. studies in Taiwan, or upon the institute.
2. Please discuss how attending this Institute would help you achieve the "Potential Outcomes" you have checked above.